## M03000001757

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CORPORATION SERVICE COMPANY

ACCOUNT NO. : I2000000195

REFERENCE :

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE: January 27, 2014

ORDER TIME : 9:59 AM

ORDER NO. : 975853-005

CUSTOMER NO: 4334722

## CHANGE OF AGENT

NAME: MEDWATCH, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Susie Knight

EXAMINER'S INITIALS:

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

· **		
1. Name of the limited liability company: MEDWATCH, LI	.c	
2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	120 INTERNATIONAL PAR LAKE MARY, FL 32746	RKWAY, SUITE 220
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	120 INTERNATIONAL PAR LAKE MARY, FL 32746	RKWAY, SUITE 220
4/29/2003	M03000001357	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on t	.he records of the Florida [	Dept. of State:
Registered Agent:	GARBER, JUDITH	
Registered Office Address:	120 INTERNATIONAL PAR LAKE MARY, FL 32746	RKWAY, SUITE 220
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV NEW Registered Agent</u> :	Corporation Service Company	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street	
	Tallahassee	FL 32301
fithe limited liability company is not organized under the liconfirmed that after the change or changes are made, the Fland the business office of the registered agent will be identifiability company, it is hereby confirmed that the change(s) he members of the limited liability company or as otherwishe operating agreement of the limited liability company.	orida street address of the cal. Or, in the case of a Fl was/were authorized by an	registered office orida limited n affirmative vote of
Dennis Forani Atty Printed or typed name designee	-	
I hereby accept the appointment as registered agent and a omply with the provisions of all statutes relative to the pro- and I am familiar with and accept the obligations of my po- chapter 605, F.S. Or, if this document is being filed to men daress, I hereby confirm that the limited liability company	ree to act in this capacity per and complete perform itton as registered agent a rely reflect a change in the thus been notified in writin	I further agree to ance of my duties, is provided for in registered office ig of this change.
By: Danielle Ellonberger	•	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Agent Corporation Service Company